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10/02/2006

TOWNSEND AND TOWNSEND AND CREW, LLP
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Sara B. McPeak

(Depositor's name)

Sara B. McPeak

(Signature)

January 2, 2007

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/020,310	12/12/2001	Thomas Schwenglor	020366-080700US	8412

TITLE OF INVENTION: TIME DIVISION MULTIPLEXED OPTICAL WIRELESS POINT-TO-MULTIPOINT LINKS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	01/02/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
PAYNE, DAVID C	2613	398-118000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Townsend and Townsend I and Crew LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.	2. _____	2. _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Qwest Communications International Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Denver, CO 80202

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

 Issue Fee

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

 Publication Fee (No small entity discount permitted) A check is enclosed. Advance Order - # of Copies Five (5) copies Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).

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 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*William J. Daley*Date January 2, 2007

Typed or printed name

William J. Daley

Registration No. 52,471

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